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CONFIRMATION NO. 3121

<b>SERIAL NUMBER</b> 10/709,122	<b>FILING OR 371(c) DATE</b> 04/14/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1616	<b>ATTORNEY DOCKET NO.</b> 022727-0110
<b>APPLICANTS</b> Richard Rox Anderson, Lexington, MA; Bernhard Ortel, Boston, MA; Edwin K. Joe, New York, NY;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/462,937 04/15/2003				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 06/23/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 43
Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> 21125				
<b>TITLE</b> METHODS AND DEVICES FOR EPITHELIAL PROTECTION DURING PHOTODYNAMIC THERAPY				
<b>FILING FEE RECEIVED</b> 1033	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	